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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-575											2	
CLAIMS AS FILED - PART I (Column 2) 09505898 SMALL ENTITY									OR	OTHER THAN SMALL ENTITY		
FOR MUNISER			RFILED NUMBER EXTRA				RATE	FEE		RATE	FEE	
(37 CFR 1, 18(a))								3	OR			
70TAL CLAMS (37 OFR 1.16(c))		$\Box$	minus 20 -	20 - /-			<u> </u>		OR			
(37 CFR 1.16(b))			girds 3 ·				×1		OR	×4•		
MULTIPLE DEPENDENT CLAM PRESENT (37 CFR 1.16(d))							+5		OR	+s•		
" If the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II												
(Column 1) (Column 2) (Column 3)						-	SMALL 6	NTITY	OR	OTHER SMALL	THAN ENTITY	
NTA	ו לעוזיואו	CLAIMS EMAINING AFTER, RENDMENT	F	NIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT/ EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
ž	Total *	24	Mays "	99	• /		x 8e		ÓR	X 8		
<b>AMENDMENT</b>	tations ration	ろ	Minus	7	7		X 8=		OR	x s=		
₹	PREST PRESENTATION	HOP MALTERS	DEFENDENT	COLANIA DICE	F/L1680)		+8		OR	+8e		
,							TOTAL ADOL FEE		OR	TOTAL ADD'L FEE		
10	16/810 0	Column 1)		(Column 2)	(Column 3)	•			•			
ENT B	R	CLAIMS EMAINING AFTER MENDMENT	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
DME.	Total *	24	Minus "	29	• /		×4	1	OR	x 8	1	
品	Caccas rathing agreement	6	Minus	7_	• /		X 5 e	1.	OR	×8=	/	
AM	FIRST PRESENTATIO	NOF MALTPLE	DEPENDENT	CLAIM (37 CF	R 1.10(4))		+8=	/	OR	+8=	/ ·	
TOTAL ADD1, FEE									OR	ADD'L FEE		
	, , ,	Column 1)		(Cotume 2)	(Column 3)				_		•	
ENTC	//////////	CLAIMS EMAINING AFTER ENDMENT	P	HIGHEST NUMBER REVIOUSLY PAID ROR.	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ME	Total grame s.vegs	24	Minus *	$\propto 9$	• /		×4•		OR	x 8 «		
AMENDM	Statement of Corner Cor	51.	Mirro	7	•/		×4		OR	× 8 •		
₹	FIRST PRESENTATION	N OF MULTIPLE	DEPENDENT	OLAM (01 OF	R, £ 1660)		+1		OR.	+ 4		
TOTAL ADD'L FEE									OR	TOTAL ADDL FEE		
" If the entry in column 1 is less than the entry in column 2, write "O" in column 2. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".												

The "Righest Number Previously Paid For" (Total or Independent) in the highest number bund in the sporoprists box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fits (and by the USPTO to process) as application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.16. This collection is estimated to take 12 industrate to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Then will very depending upon the individual case. Any comments on the expect of time you require to complete this form and/or suggestions for reducing this bunden, should be sent to the Chief information Officer, U.S. Patent and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Advandria, VA 22313-1450.